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Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	
Case number (if known)	Chapter you are filing under:
	Chapter 7 Chapter 11
	Chapter 12 Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name	Krista First name	First name
Write the name that is on your government-issued picture identification (for example, your driver's license or passport	Marie Middle name Fahey	Middle name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the last 8 years	First name	First name
Include your married or maiden names.	Middle name	Middle name
maiden names.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your Social	XXX - XX3926	xxx - xx-
Security number or federal Individual	OR	OR
Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-

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Debtor 1 Krista First Name	Marie Fahey Middle Name Last Name	Case number (if known)
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
Identification Numbers (EIN) you have used in the last	Business name	Business name
8 years	Business name	Business name
Include trade names and doing business as names	EIN	EIN
	EIN	EIN
5. Where you live	602 Table Street	If Debtor 2 lives at a different address:
	Number Street	Number Street
	Lockport Illinois 60441 City State Zip Code	City State Zip Code
	Will	
	If your mailing address is different from the one above, fill it in here. Note that the court will send an notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	City State Zip Code	City State Zip Code
6. Why you are choosing this district	Check one:	Check one:
to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	I have another reason. Explain. (See 28 U.S.C. §§ 1	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)
		_

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Debtor 1 Krista	Marie		Case number (if known)	
First Name	Middle Name	Last Name		
Part 2: Tell the Court Abo	out Your Bankruptcy	y Case		
7. The chapter of the Bankruptcy Code you are choosing to file under		ief description of each, see <i>Notice Req</i> 2010)). Also, go to the top of page 1 and	nuired by 11 U.S.C. § 342(b) for Individuals for the dividuals for the dividual for the d	Filing for
8. How you will pay the fee	more details abordanties abordanties check, may pay with a company with a company may be a company to the official pove you choose this	out how you may pay. Typically, if you or money order If your attorney is credit card or check with a pre-printer of the fee in installments. If you choose any Your Filing Fee in Installments (Cony fee be waived (You may request is not required to, waive your fee, an erty line that applies to your family si	e this option, sign and attach the <i>Applic</i>	pay with cash, lf, your attorney ation for apter 7. By law, a than 150% of nstallments). If
9. Have you filed for bankruptcy within the last 8 years?	✓ No. Yes. District District District	When When	MM / DD / YYYY	
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	✓ No. Yes. Debtor District Debtor District	<u>W</u> hen <u>W</u> hen	MM / DD / YYYY Relationship to you	
11. Do you rent your residence?	✓ No. Go	ndlord obtained an eviction judgment a o to line 12.	ngainst you and do you want to stay in your re In Judgment Against You (Form 101A) and file	

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Fahey Debtor 1 Krista Marie __ Case number (if known) First Name Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. **|** For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Krista Marie Fahey Case number (if known)
First Name Middle Name Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Debtor 1 Krista First Name		Fahey C	ase number (if known)	
	estions for Reporting Purposes			
16. What kind of debts do you have?	No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily	primarily for a personal, business debts? Busine nvestment or through the	family, or household purpo ess debts are debts that you e operation of the business	incurred to obtain or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	✓ No.	7. Do you estimate that after	er any exempt property is exc tribute to unsecured creditors	
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	<u> </u>	001-50,000 001-100,000 e than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$1 \$10,000,001-\$1 \$50,000,001-\$ \$100,000,001	\$1,0 million \$1,0 million \$100 million	0,000,001-\$1 billion 00,000,001-\$10 billion ,000,000,001-\$50 billion e than \$50 billion
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$1 \$10,000,001-\$ \$50,000,001-\$ \$100,000,001-\$	\$1,0 million \$1,0 million \$100 million	0,000,001-\$1 billion 100,000,001-\$10 billion ,000,000,001-\$50 billion e than \$50 billion
Part 7: Sign Below	I have examined this petition, a			
For you	correct. If I have chosen to file under Chof title 11, United States Code. under Chapter 7. If no attorney represents me an out this document, I have obtain I request relief in accordance will understand making a false state connection with a bankruptcy oboth. 18 U.S.C. §§ 152, 1341, /s/ Krista Fahey	napter 7, I am aware that I I understand the relief av d I did not pay or agree to ned and read the notice r ith the chapter of title 11, tement, concealing proper case can result in fines up	may proceed, if eligible, un railable under each chapter, o pay someone who is not a equired by 11 U.S.C. § 342 United States Code, specierty, or obtaining money or to \$250,000, or imprisonn	and I choose to proceed an attorney to help me fill (b). fied in this petition. property by fraud in
	Signature of Debtor 1 Executed on2/6/2017 MM / DE	0/YYYY	Signature of Debtor 2 Executed onMM	/ DD / YYYY

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Debtor 1 Krista	Marie	Fahey	Case number (if I	(nown)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one	eligibility to proceed un	der Chapter 7, 11, 12	, or 13 of title 11, United	ave informed the debtor(s) about I States Code, and have explained the Iso certify that I have delivered to the
If you are not	debtor(s) the notice requ	uired by 11 U.S.C. § 3	342(b) and, in a case in v	hich § 707(b)(4)(D) applies, certify that I
represented by an	have no knowledge afte	r an inquiry that the i	nformation in the sched	ules filed with the petition is incorrect.
attorney, you do not	· ·	. ,		•
need to file this page.	/s/ Yisroel Y Mosko	vits	Date	2/6/2017
	Signature of Attorney			M / DD / YYYY
	Yisroel Y Moskovits			
	Printed name			
	Semrad Law Firm			
	Firm name			
	10 N. Martingale Roa	d		
	Street			
	Suite 400			
	Schaumburg		Illinois	60173
	City		State	Zip Code
	Contact phone	3122543191	Email address	imoskovits@semradlaw.com
			Illinois	
	Bar number		State	

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Fill in this infor	mation to identify your ca	ase:	
Debtor 1	Krista	Marie	Fahey
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	Northern	District of Illinois
Case number (If known)			(State)

Check if this is an
amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
. Schedule A/B: Property (Official Form 106A/B)	\$0.00
1a. Copy line 55, Total real estate, from Schedule A/B	<u>*</u>
1b. Copy line 62, Total personal property, from Schedule A/B	\$6,490.00
1c. Copy line 63, Total of all property on Schedule A/B	\$6,490.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	,
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$0.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	-
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$42,891.28
Your total liabilities	\$42,891.28
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$2,219.43
Copy you. Committed monthly moonly monthly mon	

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Debtor 1 Krista Fahey Marie _ Case number (if known) First Name Middle Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$3,145.19 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$27,835.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$20.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$27,855.00

9g. Total. Add lines 9a through 9f.

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					r ago =o o	_		
Fill in this	information	to identify your c	ase:					
Debtor 1	Krista		Marie		Fahey			
Debtor 2	First I	Name	Middle N	ame	Last Name			
(Spouse, if fi	ling) First I	Name	Middle N	ame	Last Name			
United Sta	ates Bankrup	tcy Court for the:	Northern		District of Illinois (State)			
Case num (If known)	nber							_
Officia	al Form	106A/B						Check if this is an amended filing
Sche	dule A	/B: Prope	rty					12/1
category v responsible write your Part 1:	where you t le for supply name and Describe	hink it fits best. E ring correct infor case number (if k Each Residenc	Be as complete ar mation. If more sp nown). Answer ev ee, Building, Lar	nd accu pace is very qu nd, or (sset only once. If an asset fits in nurate as possible. If two married pureded, attach a separate sheet estion. Other Real Estate You Own oversidence, building, land, or similation.	eople are to this fo	e filing together, both a orm. On the top of any a an Interest In	re equally
7. DO YOU	No. Go to F		juitable liiterest i	ii aliy i	esidence, building, land, or simila	ii propert	y:	
	Yes. Where	is the property?						
1.1	Street addre	ess, if available, or	other description	Sin	is the property? Check all that applingle-family home uplex or multi-unit building ondominium or cooperative	ly.	the amount of any secu	claims or exemptions. Put red claims on <i>Schedule D: iims Secured by Property.</i> Current value of the portion you own?
				ш	anufactured or mobile home			
	Number	Street			and		Describe the nature of	f your ownership
	City	State	Zip Code	H	vestment property meshare ther		interest (such as fee s the entireties, or a life	simple, tenancy by
	,		·	one. De	nas an interest in the property? Clebtor 1 only ebtor 2 only ebtor 1 and Debtor 2 only least one of the debtors and another		Check if this is co (see instructions)	mmunity property
				ш	information you wish to add abou		m. such as local	
					rty identification number:		,	
If you		e more than one, li		Sin Du	is the property? Check all that applingle-family home uplex or multi-unit building ondominium or cooperative anufactured or mobile home	ly.	the amount of any secu	claims or exemptions. Put red claims on Schedule D: ims Secured by Property. Current value of the portion you own?
	Number	Street			and		Describe the nature o	f vour ownership
	City		7:- O- d-	H	vestment property meshare ther		interest (such as fee s the entireties, or a life	simple, tenancy by
	City	State	Zip Code	Who I one. De De De Constitution Attornation De Constitution De Constitution Attornation De Constitution De C	ebtor 1 only ebtor 2 only lebtor 1 and Debtor 2 only least one of the debtors and another information you wish to add about	er	(see instructions)	mmunity property

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Debtor 1	Krista First Name	Marie Middle Name	Fahey Last Name	Case number	(if known)	
1.3 Stree	et address, if available, or other		hat is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	t apply.	the amount of any secu	claims or exemptions. Put red claims on Schedule D: ims Secured by Property. Current value of the portion you own?
Nun		ip Code	Land Investment property Timeshare Other		Describe the nature of interest (such as fee sthe entireties, or a life	imple, tenancy by
			The has an interest in the propert Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and the information you wish to add	nother	Check if this is co (see instructions)	mmunity property
	the dollar value of the portic ve attached for Part 1. Write	pr on you own for al that number he	roperty identification number: II of your entries from Part 1, incl re.			
Do you ow you own th	nat someone else drives. If you	lease a vehicle, a	in any vehicles, whether they are	-	-	
S. Cars, va		vericles, motorcy	ycies			
3.1	Make Model: Year:		Who has an interest in the proone. Debtor 1 only	pperty? Check	the amount of any secu	claims or exemptions. Put ured claims on <i>Schedule D:</i> nims Secured by Property.
	Approximate mileage: Other information: 2011 Kia Soul		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a		Current value of the entire property? \$3516.00	Current value of the portion you own? \$3516.00
3.2	Make Model: Year:		who has an interest in the proone.	pperty? Check	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: nims Secured by Property.
	Approximate mileage: Other information:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this is community instructions)		Current value of the entire property?	Current value of the portion you own?

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	Krista	Marie		ase number	(if known)	
	First Name	Middle Name	Last Name			
3.3	Make Model: Year:		Who has an interest in the property? one. Debtor 1 only	Check	the amount of any secu	claims or exemptions. Pured claims on Schedule wims Secured by Property
	Approximate mileage:		Debtor 2 only		Current value of the	Current value of the
	Other information:		Debtor 1 and Debtor 2 only		entire property?	portion you own?
			At least one of the debtors and ano	ther		
			Check if this is community prope instructions)	rty (see		
3.4	Make		Who has an interest in the property?	Check		claims or exemptions. P
	Model: Year:		one.		,	red claims on <i>Schedule</i> nims Secured by Property
	Approximate mileage:	-	Debtor 1 only			
	-		Debtor 2 only		Current value of the entire property?	Current value of the portion you own?
	Other information:		Debtor 1 and Debtor 2 only		——————	portion you own:
			At least one of the debtors and ano	ther		
			Check if this is community prope instructions)	rty (see		
	No Yes					
	Yes Make		Who has an interest in the property?	' Check		claims or exemptions. P
	Yes			' Check	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on <i>Schedule</i>
	Yes Make Model:	<u> </u>	one.	' Check	the amount of any secu	red claims on <i>Schedule</i>
	Yes Make Model: Year:		one. Debtor 1 only	' Check	the amount of any secu Creditors Who Have Cla	red claims on Schedule ims Secured by Property
	Yes Make Model: Year: Approximate mileage:		one. Debtor 1 only Debtor 2 only		the amount of any secu Creditors Who Have Cla Current value of the	red claims on Schedule ims Secured by Propert Current value of the
	Yes Make Model: Year: Approximate mileage:		one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	ther	the amount of any secu Creditors Who Have Cla Current value of the	red claims on Schedule hims Secured by Property Current value of the
4.1	Yes Make Model: Year: Approximate mileage: Other information: Make		one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and ano Check if this is community prope instructions) Who has an interest in the property?	ther erty (see	the amount of any secu Creditors Who Have Cla Current value of the entire property? Do not deduct secured	red claims on Schedule hims Secured by Property Current value of the portion you own? claims or exemptions. P
4.1	Yes Make Model: Year: Approximate mileage: Other information: Make Model:		one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and ano Check if this is community prope instructions) Who has an interest in the property?	ther erty (see	the amount of any secu Creditors Who Have Cla Current value of the entire property? Do not deduct secured the amount of any secu	red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. Fored claims on Schedule
4.1	Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year:		one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and ano Check if this is community prope instructions) Who has an interest in the property? one. Debtor 1 only	ther erty (see	the amount of any secu Creditors Who Have Cla Current value of the entire property? Do not deduct secured	red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. Fored claims on Schedule
4.1	Yes Make Model: Year: Approximate mileage: Other information: Make Model:		one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and ano Check if this is community prope instructions) Who has an interest in the property? one. Debtor 1 only Debtor 2 only	ther erty (see	the amount of any secu Creditors Who Have Cla Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Cla Current value of the	red claims on Schedule ims Secured by Property Current value of the portion you own? claims or exemptions. Pured claims on Schedule ims Secured by Property Current value of the
4.1	Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year:		one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and ano Check if this is community prope instructions) Who has an interest in the property? one. Debtor 1 only	ther erty (see	the amount of any secu Creditors Who Have Cla Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on Schedule lims Secured by Property Current value of the portion you own? claims or exemptions. Priced claims on Schedule lims Secured by Property
4.1	Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage:		one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and ano Check if this is community prope instructions) Who has an interest in the property? one. Debtor 1 only Debtor 2 only	ther erty (see	the amount of any secu Creditors Who Have Cla Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Cla Current value of the	red claims on Schedule ims Secured by Property Current value of the portion you own? claims or exemptions. Pured claims on Schedule ims Secured by Property Current value of the
4.1	Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage:		one. Debtor 1 only Debtor 2 only At least one of the debtors and ano Check if this is community prope instructions) Who has an interest in the property? one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	ther erty (see Check	the amount of any secu Creditors Who Have Cla Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Cla Current value of the	red claims on Schedule ims Secured by Property Current value of the portion you own? claims or exemptions. Pured claims on Schedule ims Secured by Property Current value of the

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Fahey Debtor 1 Krista Marie Case number (if known) First Name Middle Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... couch and chair, queen size bed, 2 twin beds, 3 dressers \$500.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... 2 tvs, cellphone, dvd player \$500.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... some scrap-booking items \$100.00 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... clothing \$200.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... costume jewelry \$100.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1400.00 for Part 3. Write that number here

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Fahey

Marie

Debtor 1 Krista Case number (if known) First Name Middle Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: 17.1. Checking account: Chase Bank \$25.00 17.2. Checking account: 17.3. Savings account: Chase Bank \$49.00 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture % of ownership: Name of entity Yes. Give specific information about

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Debt	tor 1 Krista	Marie	Fahey	Case number (if known)	
	First Name	Middle Name	Last Name		
20.	Negotiable instruments	orate bonds and other negotia include personal checks, cashiers ents are those you cannot transform Issuer name:	s' checks, promissory no	ites, and money orders.	
21.			o), thrift savings accounts	s, or other pension or profit-sharing plans	
	No	Type of account:	Institution name:		
	Yes. List each account	401(k) or similar plan:			
	separately.	Pension plan:			
		IRA:			
		Retirement account:			
		Keogh:			
		Additional account:			
		Additional account:			
22.		prepayments d deposits you have made so tha with landlords, prepaid rent, publ			
	Yes	Electric:			
		Gas:			
		Heating oil:			
		Security deposit on rental unit:			
		Prepaid rent:			
		Telephone:	-		
		Water:			
		Rented furniture:			
		Other:			
23.	Annuities (A contract for	or a periodic payment of money t	o you, either for life or fo	r a number of years)	
	✓ No ☐ Yes	Issuer name and description:			

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Debt	tor 1 Krista	Marie	Fahey	Case number (if known)	
	First Name	Middle Name	Last Name		
24.	Interests in an education IRA, in 26 U.S.C. §§ 530(b)(1), 529A(b), an		qualified ABLE program, or unde	r a qualified state tuition program.	
	No Institution name and Yes	l description. Separ	rately file the records of any interest	s.11 U.S.C. § 521(c):	
25.	Trusts, equitable or future intere	sts in property (o	ther than anything listed in line	1), and rights or powers	
	exercisable for your benefit No				
	Yes. Describe				
26.	Patents, copyrights, trademarks, Examples: Internet domain names,			ments	
	✓ No Yes. Describe				
27.	Licenses, franchises, and other of Examples: Building permits, exclusi			censes, professional licenses	
	✓ No Yes. Describe				
Moi	ney or property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
	ney or property owed to you? Tax refunds owed to you				portion you own?
	Tax refunds owed to you				portion you own? Do not deduct secured
	Tax refunds owed to you ☐ No ☐ Yes. Give specific information		ł tax refund	Federal:	portion you own? Do not deduct secured
	Tax refunds owed to you	ether s	I tax refund	Federal: State:	portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you No Yes. Give specific information about them, including who you already filed the return and the tax years	ether s		State: Local:	portion you own? Do not deduct secured claims or exemptions. \$1500.00 \$0.00
28.	Tax refunds owed to you No Yes. Give specific information about them, including who you already filed the return and the tax years	ether s		State:	portion you own? Do not deduct secured claims or exemptions. \$1500.00 \$0.00
28.	Tax refunds owed to you No Yes. Give specific information about them, including who you already filed the return and the tax years	ether is mony, spousal sur		State: Local:	portion you own? Do not deduct secured claims or exemptions. \$1500.00 \$0.00
28.	Tax refunds owed to you No Yes. Give specific information about them, including who you already filed the return and the tax years Family support Examples: Past due or lump sum alia	ether is mony, spousal sur		State: Local: divorce settlement, property settlemen	portion you own? Do not deduct secured claims or exemptions. \$1500.00 \$0.00 \$0.00
28.	Tax refunds owed to you No Yes. Give specific information about them, including who you already filed the return and the tax years Family support Examples: Past due or lump sum alia	ether is mony, spousal sur		State: Local: divorce settlement, property settlemen Alimony:	portion you own? Do not deduct secured claims or exemptions. \$1500.00 \$0.00 t \$0.00
28.	Tax refunds owed to you No Yes. Give specific information about them, including who you already filed the return and the tax years Family support Examples: Past due or lump sum alia	ether is mony, spousal sur		State: Local: divorce settlement, property settlemen Alimony: Maintenance: Support: Divorce settlement:	\$1500.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds owed to you No Yes. Give specific information about them, including who you already filed the return and the tax years Family support Examples: Past due or lump sum alia No Yes. Give specific information	ether is mony, spousal sup 		State: Local: divorce settlement, property settlemen Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions. \$1500.00 \$0.00 t \$0.00 \$0.00 \$0.00
29.	Tax refunds owed to you No Yes. Give specific information about them, including who you already filed the return and the tax years Family support Examples: Past due or lump sum alia	ether is mony, spousal sur u nsurance payment	oport, child support, maintenance, o	State: Local: divorce settlement, property settlemen Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$1500.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds owed to you No Yes. Give specific information about them, including who you already filed the return and the tax years Family support Examples: Past due or lump sum ali No Yes. Give specific information Other amounts someone owes yo Examples: Unpaid wages, disability i	ether is mony, spousal sur u nsurance payment	oport, child support, maintenance, o	State: Local: divorce settlement, property settlemen Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$1500.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb	tor 1 Krista	Marie	Fahey	Case number (if known)	
	First Name	Middle Name	Last Name		_
31.	Interests in insurance Examples: Health, disal		avings account (HSA); credit,	homeowner's, or renter's insurance	
	Yes. Name the instroof each policy and	urance company	mpany name:	Beneficiary:	Surrender or refund value:
32.				icy, or are currently entitled to receive	
	No Yes. Describe				
33.		parties, whether or not you employment disputes, insurance		e a demand for payment	
	No Yes. Describe				
34.	Other contingent and to set off claims	unliquidated claims of eve	ry nature, including counte	rclaims of the debtor and rights	
	✓ No ☐ Yes. Describe				
35.	Any financial assets y	you did not already list			
	✓ No Yes. Describe				
36.		of all of your entries from Pa		for pages you have attached	\$1574.00
Part	5: Describe Any B	Susiness-Related Proper	tv You Own or Have an	Interest In. List any real estate in Pai	t1.
37.		ny legal or equitable intere			
07.	-	, logal of equitable liftere	ot any baomicoo-relateu p		Current value of the
	No. Go to Part 6. Yes. Go to line 38.				portion you own? Do not deduct secured claims or exemptions
38.	Accounts receivable	or commissions you already	earned		or arrangement
	No Yes. Describe				
39.		rnishings, and supplies lated computers, software, mo	odems, printers, copiers, fax n	nachines, rugs, telephones, desks, chairs, elec	etronic devices
	No Yes. Describe				

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Deb	tor 1 Krista	Marie	Fahey	Case number (if known)	
40.	First Name Machinery fixtures a	Middle Name equipment, supplies you use in	Last Name	our trade	
40.	—	equipment, supplies you use in	business, and tools of yo	our trade	
	✓ No Yes. Describe				
	res. Describe				
41.	Inventory				
	✓ No				
	Yes. Describe				
42.	Interests in partnersh	nips or joint ventures			
	✓ No				
	Yes. Give specific	Name	of entity:	% of ownership:	
	information about				
	them				
43. (Customer lists, mailing	lists, or other compilations		· ·	-
	No No				
		include personally identifiable info	mation (as defined in 11	U.S.C. § 101(41A))?	
	<u> </u>				
	□ No				
	Yes. Desc	INDE			
44.	Any business-related	property you did not already li	st		
	✓ No				
	Yes. Give specific				
	information				
					<u> </u>
					<u> </u>
45. A	dd the dollar value of	all of your entries from Part 5, i	ncluding any entries for	pages you have attached	
		er here		pages you have attached	
	Describe Any F	arm- and Commercial Fish	ing-Related Propert	y You Own or Have an Interest In.	
Part		n interest in farmland, list it in Part 1		y rou own or mave an interest in	
46.	Do you own or have a	any legal or equitable interest i	n any farm- or commerc	cial fishing-related property?	
	No. Go to Part 7.				Current value of the
	Yes. Go to line 47				portion you own? Do not deduct secured claims
					or exemptions
47.	Farm animals Examples: Livestock, p	oultry farm-raised fish			
	— N.	.cay, raini raioca non			
	No Yes. Describe				
	L 163. Describe				
	-				

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Debt	tor 1 Krista First Name	Marie Middle Name	Fahey Last Name	Case number (if known)	
48.	Crops-either growing	or harvested			
	No Yes. Describe				
49.	Farm and fishing equip	pment, implements, machinery, fixtu	res, and tools of tr	ade	
	✓ No				
	Yes. Describe				
50.	Farm and fishing supp	lies, chemicals, and feed			
	✓ No				
	Yes. Describe				
51.	Any farm- and comme	rcial fishing-related property you dic	I not already list		
01.	No	rolatinosimg rolatou proporty you all	. not an oddy not		
	Yes. Describe				
		II of your entries from Part 6, includi r here		pages you have attached	
				_	
Part '	7: Describe All Pro	perty You Own or Have an Inter	rest in That You	Did Not List Above	
53.		perty of any kind you did not already s, country club membership	list?		
	✓ No	o, ocumay olds mornsolomp			
	Yes. Give specific				
	information				
54. A	dd the dollar value of a	ll of your entries from Part 7. Write t	hat number here		>
		,			
Part	List the Totals of	f Each Part of this Form			
55. F	Part 1: Total real estate	e, line 2		>	
56. p	oart 2 total vehicles, lin	e 5	\$3516.00		
57. P	art 3: Total personal ar	nd household items, line 15	\$1400.00		
58. P	art 4: Total financial as	ssets, line 36	\$1574.00		
59. F	Part 5: Total business-re	elated property, line 45			
60. F	Part 6: Total farm- and	fishing-related property, line 52	_		
61. F	Part 7: Total other prop	erty not listed, line 54			
62.1	Fotal personal property.	. Add lines 56 through 61	\$6490.00	Copy personal property total ▶	+ \$6490.00
					\$6490.00
63. T	otal of all property on S	Schedule A/B. Add line 55 + line 62			

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Fill in this information to identify your case:					
Debtor 1	Krista	Marie	Fahey		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	Northern	District of Illinois		
			(State)		
Case number (If known)					

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	Part 1: Identify the Property You Claim as Exempt						
1.	. Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you.						
	You are claiming state and federal	nonbankruptcy exemp	otions. 11 U.S.C. § 522(b)(3)				
	You are claiming federal exemption	ns. 11 U.S.C. § 522(b)(2)				
2.	For any property you list on Schedule A	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption			
	Brief description: Checking account, Chase Bank Line from Schedule A/B: 17	\$25.00	\$25.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)			
	Brief			735 ILCS 5/12-1001(b)			
	description:	\$49.00	\$49.00				
	Savings account, Chase Bank		100% of fair market value, up to any	_			
	Line from		applicable statutory limit				
	Schedule A/B: 17						
3.	✓ No	rery 3 years after that for	375? cases filed on or after the date of adjustment.) vithin 1,215 days before you filed this case?				

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Debtor 1 Krista Marie Fahey Case number (if known)
First Name Middle Name Last Name

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
	Copy the value from Schedule A/B		
Brief description:	\$100.00	\$100.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: some scrap-booking items Line from Schedule A/B: 09	\$100.00	\$100.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: clothing Line from Schedule A/B: 11	\$200.00	\$200.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)
Brief description: 2 tvs, cellphone, dvd player Line from Schedule A/B: 07	\$500.00	\$500.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: couch and chair,queen size bed, 2 twin beds, 3 dressers Line from Schedule A/B: 06	\$500.00	\$500.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: , 2011 Kia Soul Line from Schedule A/B: 03	\$3,516.00	\$2,400.00; \$1,116.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b)
Brief description: Federal, Anticipated tax refund Line from	\$1,500.00	\$1,500.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)

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			•			
Fill in this infor	mation to identify your ca	ase:				
Debtor 1	Krista	Marie	Fahey			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States E	Bankruptcy Court for the:	Northern	District of Illinois			
			(State)			
Case number (If known)						
L	Form 106D					Check if this is an amended filing
Schedu	ıle D: Credit	ors Who Hav	e Claims Secure	ed by Prop	erty	12/15
more space is			are filing together, both are equ ber the entries, and attach it to t			
1. Do any o	reditors have claims s	ecured by your propert	y?			
✓ No. (Check this box and subr	mit this form to the court w	rith your other schedules. You hav	e nothing else to repo	ort on this form.	
Yes.	Fill in all of the information	n below.				
Part 1: List	All Secured Claims					
for each of	laim. If more than one cre		ed claim, list the creditor separately ist the other creditors in Part 2. As to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral	Column C Unsecured portion

this claim

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Fill in	this infor	mation to identify your c	ase:			
Debt	or 1	Krista	Marie	Fahey		
		First Name	Middle Name	Last Name		
Debt	or 2 se, if filing)	E'm I Name	NAC-L-III - N.L.	L I M		
(Spou	se, ii iiiiig)	First Name	Middle Name	Last Name		
Unite	ed States B	ankruptcy Court for the:	Northern	District of Illinois		
				(State)		
Case (If kno	number					
						Check if this is an amended filing
Offi	icial F	orm 106E/F				Check if this is an amended him
Sc	hedu	ıle E/F: Cre	ditors Who	Have Unsec	ured Claims	12/1:
other Form claim the ei know	party to a 106A/B) a is that are ntries in the n).	any executory contracts and on <i>Schedule G: Exe</i> listed in <i>Schedule D:</i> C he boxes on the left. At	s or unexpired leases that cutory Contracts and Une creditors Who Hold Claims tach the Continuation Pag	could result in a claim. A xpired Leases (Official Fo Secured by Property. If n	Iso list executory contracts rm 106G). Do not include an nore space is needed, copy t	n NONPRIORITY claims. List the on Schedule A/B: Property (Official y creditors with partially secured he Part you need, fill it out, number rite your name and case number (if
Part	1: List	All of Your PRIORIT	Y Unsecured Claims			
1.	Do any cr	editors have priority ur	secured claims against yo	ou?		
	No. 0	Go to Part 2.				
	Yes.					
	listed, ider As much a	ntify what type of claim it as possible, list the claims	is. If a claim has both priority	and nonpriority amounts, ing to the creditor's name.	list that claim here and show b If you have more than two price	arately for each claim. For each claim oth priority and nonpriority amounts. ority unsecured claims, fill out the

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total

claim

Priority

amount

Nonpriority

amount

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Fahev Debtor 1 Krista Marie Case number (if known) First Name Middle Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 Advocate Health Care \$1,084.76 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 48458 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Michigan 48237 Oak Park City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only **✓** Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ___ medical Is the claim subject to offset? Yes 4.2 Advocate Medical Group \$40.00 Last 4 digits of account number Nonpriority Creditor's Name 9730 S Western Ave # 500 When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Evergreen Park Illinois 60805 City Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ____ medical Is the claim subject to offset? **✓** No Yes ALLY FINANCIAL 4.3 \$0.00 9304 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 200 RENAISSANCE CTR 6/1/2007 Number As of the date you file, the claim is: Check all that apply. Contingent Michigan **DETROIT** 48243 Unliquidated City State Zip Code Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ 054 Automobile Is the claim subject to offset? **✓** No Yes

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Debtor 1 Krista Marie Fahey Case number (if known)
First Name Middle Name Last Name

Part 2	Your NONPRIORITY Unsecured Claims - Continuation	n Page	
	After listing any entries on this page, number them beginning w	rith 4.5, followed by 4.6, and so forth.	Total claim
4.4	American Medical Collection Agency	Last 4 digits of account number	\$20.00
	Nonpriority Creditor's Name 4 Westchester Plaza # Suite 110	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Elmsford New York 10523	Unliquidated	
	City State Zip Code	_ Disputed	
	Who incurred the debt? Check one. Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	<u>'</u>	Student loans	
	Debtor 2 only Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts Other. Specify collections: medical	
	Is the claim subject to offset?	o and a opening to a constant and a	
	✓ No		
	Yes		
4.5	CACH LLC	Last 4 digits of account number	\$3,250.57
	Nonpriority Creditor's Name 1001 E Chicago Ave	When was the debt incurred? n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Suite 121	Contingent	
		Unliquidated	
	Naperville Illinois 60540 City State Zip Code	_ Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	Debtor 1 only	Student loans	
	Debtor 2 only	Obligations arising out of a separation agreement or	
	Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	Check if this claim relates to a community debt	Other. Specify judgment	
	Is the claim subject to offset?	_	
	✓ No		
	Yes		
4.6	CAPITAL ONE Nonpriority Creditor's Name	 Last 4 digits of account number 8582 	\$270.00
	P O Box 30253	When was the debt incurred? 8/1/2014	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Salt Lake City Utah 84130 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts	
	Is the claim subject to offset?	Other. Specify CreditCard	
	✓ No		
	Yes		

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Debtor 1 Krista Marie Fahey Case number (if known)
First Name Middle Name Last Name

Part 2	Your NONPRIORITY Unsecured Claims - Continuation	Page	
	After listing any entries on this page, number them beginning with	th 4.5, followed by 4.6, and so forth.	Total claim
4.7	CHASE CARD	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name PO BOX 15298	When was the debt incurred? 9/1/2002	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	WILMINGTON Delaware 19850	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
		Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify CreditCard	
	✓ No	_	
	Yes		
4.8	Client Services Inc Nonpriority Creditor's Name	Last 4 digits of account number	\$270.68
	3451 Harry S. Truman Blvd.	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Saint Charles Missouri 63301	Unliquidated	
	City State Zip Code	Disputed	
	Who incurred the debt? Check one. Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	Check if this claim relates to a community debt	Other. Specify colelctions	
	Is the claim subject to offset?		
	✓ No		
	Yes		
4.9	CMRE FINANCIAL SVCS IN Nonpriority Creditor's Name	Last 4 digits of account number	\$50.52
	3075 E IMPERIAL HWY STE	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	BREA California 92821	Unliquidated	
	City State Zip Code	Disputed	
	Who incurred the debt? Check one. Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar	
		debts	
	Check if this claim relates to a community debt Is the claim subject to offset?	collections: RADIOLOGY Other. Specify IMAGING	
	No		
	Yes		

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Case number (if known) Debtor 1 Krista First Name Fahey Marie Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth

	After listing any entries on this page, number them beginning wit	n 4.5, followed by 4.6, and so forth.	lotai ciaim
4.10	COLLECTION BUREAU OF A Nonpriority Creditor's Name	Last 4 digits of account number 2454	\$318.00
	25954 EDEN LANDING RD Number Street	When was the debt incurred? 1/1/2015	
		As of the date you file, the claim is: Check all that apply.	
	HAYWARD California 94545	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim: Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ 001 Collection; Collecting for	
	✓ No	ORIGINAL CREDITOR: DS Other. Specify SERVICES OF AMERICA INC	
	Yes		
4.11	ComEd	Last 4 digits of account number	\$1,213.57
	Nonpriority Creditor's Name 3 Lincoln Center	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Bankruptcy Section	Contingent	
	Oakbrook Terrace Illinois 60181	Unliquidated	
	City State Zip Code	Disputed	
	Who incurred the debt? Check one. Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts	
	Is the claim subject to offset?	Other. Specify past due utility	
	No		
	Yes		
4.12	Credit Collection Services	Last 4 digits of account number	\$200.00
	Nonpriority Creditor's Name 2 Wells Ave	Last 4 digits of account number When was the debt incurred? n/a	
	Number Street		
		As of the date you file, the claim is: Check all that apply. Contingent	
		Unliquidated	
	Newton Center Massachusetts 02459 City State Zip Code	Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	Debtor 1 only	Student loans	
	Debtor 2 and Debtor 2 and	Obligations arising out of a separation agreement or	
	Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	Check if this claim relates to a community debt	Other. Specify collections: medical	
	Is the claim subject to offset? No		

Yes

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Fahev Debtor 1 Krista Marie Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 Creditors Collection Bureau, Inc. \$438.98 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 63 Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60901 Kankakee Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify ____ collections: medical Is the claim subject to offset? **✓** No Yes 4.14 ENHANCED RECOVERY CO L \$0.00 Last 4 digits of account number __ 6815 Nonpriority Creditor's Name When was the debt incurred? 6/1/2011 8014 BAYBERRY RD Number As of the date you file, the claim is: Check all that apply. Contingent JACKSONVILLE 32256 Florida Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? ORIGINAL CRÉDITOR: AT T **✓** No Yes Federal Loan Servicing 4.15 \$7,547.00 Last 4 digits of account number 0004 Nonpriority Creditor's Name Po Box 530210 When was the debt incurred? 1/1/2007 Number As of the date you file, the claim is: Check all that apply. Contingent 30353 Atlanta Georgia Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset?

✓ No Yes

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Fahev Debtor 1 Krista Marie Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 Federal Loan Servicing \$6,281.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 530210 When was the debt incurred? 1/1/2005 Number Street As of the date you file, the claim is: Check all that apply. Contingent Atlanta Georgia 30353 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes 4.17 Federal Loan Servicing \$6,280.00 Last 4 digits of account number 0003 Nonpriority Creditor's Name Po Box 530210 When was the debt incurred? 1/1/2006 Number Street As of the date you file, the claim is: Check all that apply. Contingent 30353 Atlanta Georgia Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes 4.18 Federal Loan Servicing \$3,140.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 530210 When was the debt incurred? 9/1/2005 Number As of the date you file, the claim is: Check all that apply. Contingent 30353 Atlanta Georgia Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset?

No Yes

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Fahev Debtor 1 Krista Marie Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.19 Federal Loan Servicing \$2,509.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 530210 When was the debt incurred? 9/1/2007 Number Street As of the date you file, the claim is: Check all that apply. Contingent Atlanta Georgia 30353 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes 4.20 Federal Loan Servicing \$2,078.00 Last 4 digits of account number 0006 Nonpriority Creditor's Name Po Box 530210 When was the debt incurred? 3/1/2007 Number Street As of the date you file, the claim is: Check all that apply. Contingent 30353 Atlanta Georgia Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes 4.21 GMAC \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 15303 S 94TH AVE When was the debt incurred? 7/1/2002 Number As of the date you file, the claim is: Check all that apply. Contingent ORLAND PARK 60462 Illinois Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ 060 Automobile Is the claim subject to offset?

No Yes

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Fahev Debtor 1 Krista Marie Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.22 Harris and Harris LTD \$1,168.22 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 111 West Jackson Blvd Number As of the date you file, the claim is: Check all that apply. Suite 400 Contingent Unliquidated Illinois 60604 Chicago State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt collections- Advocate Health Other. Specify Hospitals Is the claim subject to offset? **✓** No Yes 4.23 high Tech Medical Park \$55.08 Last 4 digits of account number _ Nonpriority Creditor's Name When was the debt incurred? 0236 Momentum Place n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Illinois 60689 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ medical Is the claim subject to offset? **✓** No Yes I C SYSTEM INC 4.24 \$136.00 Last 4 digits of account number Nonpriority Creditor's Name 7/1/2016 When was the debt incurred? PO BOX 64378 Number Street As of the date you file, the claim is: Check all that apply. Contingent SAINT PAUL 55164 Minnesota Unliquidated Zip Code City State Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar

✓ No Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

001 Collection; Collecting for

Other. Specify ORIGINAL CREDITOR: DIRECTV

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Fahev Debtor 1 Krista Marie Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.25 ICS Collection Service \$108.26 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 1010 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60477 Tinley Park Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ colelctions Is the claim subject to offset? **✓** No Yes 4.26 Integrity orthopedics \$1,361.80 Last 4 digits of account number _ Nonpriority Creditor's Name n/a Po Box 609 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Matteson Illinois 60443 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt medical Other. Specify _ Is the claim subject to offset? **✓** No Yes Lockport Express Medical 4.27 \$30.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 16221 W. 159th St n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60441 Lockport Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims

✓ No Yes

At least one of the debtors and another

Is the claim subject to offset?

Check if this claim relates to a community debt

debts

Other. Specify _

Debts to pension or profit-sharing plans, and other similar

medical

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Fahev Debtor 1 Krista Marie Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.28 Midwest Diagnostic Pathology \$10.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 75 Remittance Dr Ste 3070 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60675 Chicago Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ service fees Is the claim subject to offset? **✓** No Yes MinuteClinic Diagnostic of Illinois \$20.00 4.29 Last 4 digits of account number _ Nonpriority Creditor's Name PO BOX 8446 When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Belfast Maine 04915 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt medical Other. Specify _ Is the claim subject to offset? **✓** No Yes Nationwide Credit & Collection 4.30 \$300.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 3219 n/a Number Street As of the date you file, the claim is: Check all that apply. C/O Evergreen Bank Group Contingent Unliquidated 60522 Hinsdale Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar

✓ No Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

Other. Specify ____

collection: medical

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Fahev Debtor 1 Krista Marie Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.31 Nationwide Recovery Service \$1,161.80 Last 4 digits of account number Nonpriority Creditor's Name PO Box 8005 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Cleveland Tennessee 37320 City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ____ collections: medical Is the claim subject to offset? **✓** No Yes Nicor Advanced Energy \$410.47 4.32 Last 4 digits of account number _ Nonpriority Creditor's Name PO Box 0632 When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Aurora Illinois 60507 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt past due utility Other. Specify ___ Is the claim subject to offset? **✓** No Yes Palos Community Hospital 4.33 \$15.17 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 12251 S. 80th Ave n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60463 Palos Heights Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ medical

✓ No Yes

Is the claim subject to offset?

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Fahev Debtor 1 Krista Marie Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.34 PLS F/K/A The Payday Loan of Illinois Inc. \$1,152.97 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 800 Jorie Blvd 2nd Floor As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60523 Oak Brook Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify garnishment notice Is the claim subject to offset? **✓** No Yes 4.35 PORTFOLIO RECOVERY ASS \$198.00 2485 Last 4 digits of account number ___ Nonpriority Creditor's Name 1/1/2016 120 CORPORATE BLVD STE 1 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent NORFOLK 23502 Virginia Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify 001 UnknownLoanType Is the claim subject to offset? **✓** No Yes **Quest Diagnostics** 4.36 \$20.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 2441 Reynolds Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Michigan 49444 Muskegon Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt

✓ No Yes

Is the claim subject to offset?

Other. Specify __

medical

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Fahev Debtor 1 Krista Marie Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.37 Quinlan and Fabish Music Company \$73.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3140 S Federal St Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60616 Chicago Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify ___ service fees Is the claim subject to offset? **✓** No Yes radiology Imaging Consultants, SC \$67.65 4.38 Last 4 digits of account number _ Nonpriority Creditor's Name n/a 75 Remittance Dr - dept 1324 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Illinois 60675 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt medical Other. Specify _ Is the claim subject to offset? **✓** No Yes RECMGMT SRVC 4.39 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 10/1/2014 When was the debt incurred? 240 EMERY STREET Number Street As of the date you file, the claim is: Check all that apply. Contingent BETHLEHEM 18015 Pennsylvania Unliquidated Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt

✓ No

Yes

Is the claim subject to offset?

Other. Specify _

Collection; Collecting for

ORIGINAL CREDITOR: 05 WASTE

MANAGEMENT RETAIL

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Fahev Debtor 1 Krista Marie Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.40 SYNCB/CARECR \$0.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 960061 When was the debt incurred? 11/1/2009 Number As of the date you file, the claim is: Check all that apply. Contingent Orlando Florida 32896 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ CreditCard Is the claim subject to offset? Yes 4.41 Transworld Systems \$20.00 Last 4 digits of account number Nonpriority Creditor's Name 25 Northwest Point Blvd # 750 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Elk Gro<u>ve Village</u> 60007 Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes 4.42 TRUST REC SV \$0.00 0480 Last 4 digits of account number Nonpriority Creditor's Name 541 OTIS BOWEN DRI When was the debt incurred? 9/1/2013 Number As of the date you file, the claim is: Check all that apply. Contingent MUNSTER 46321 Indiana Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar

✓ No Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

Collection; Collecting for

Other. Specify ORIGINAL CREDITOR: MEDICAL

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Fahev Debtor 1 Krista Marie Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.43 Universal Fidelity, LP \$89.93 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 219785 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 77218 Houston Texas City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify ____ collections- spring hill Is the claim subject to offset? **✓** No Yes 4.44 US DEP ED \$0.00 4936 Last 4 digits of account number ___ Nonpriority Creditor's Name 1/1/2007 PO BOX 5609 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent **GREENVILLE** 75403 Texas Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? **✓** No Yes Vasdekas MD, Thomas J. 4.45 \$40.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 10660 West 143rd St Suite B. Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Orland Park 60462 Illinois Zip Code Disputed City State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify __ medical

✓ No Yes

Is the claim subject to offset?

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Debtor 1 Krista Fahey Marie Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.46 \$913.00 Last 4 digits of account number Nonpriority Creditor's Name 1900 W SEVERS RD When was the debt incurred? 6/1/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent LA PORTE 46350 Indiana Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collection; Collecting for Is the claim subject to offset? Other. Specify ORIGINAL CREDITOR: MEDICAL **✓** No Yes 4.47 Vision Financial Services \$547.85 Last 4 digits of account number Nonpriority Creditor's Name PO Box 1768 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated La Porte 46352 Indiana City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt medical collections: Silver Cross Other. Specify _ Hospital Is the claim subject to offset?

✓ No Yes

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Debtor 1 Krista Marie Fahey Case number (if known)

First Na	me Middle Name Last Name			
Part 4: Add tl	ne Amounts for Each Type of Unsecured Claim			
	nmounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim.	s for s	tatistical reporting purp	oses c
			Total claims	
Total claims from Part 1	6a. Domestic support obligations.	6a.	\$0.00	
	6b. Taxes and certain other debts you owe the government	6b.	\$0.00	
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00	
	6d. Other. Add all other priority unsecured claims. Write that	6d.	\$0.00	
	amount here. 6e. Total. Add lines 6a through 6d.	6e.	\$0.00	
			Total claims	
Total claims from Part 2	6f. Student loans	6f.	\$27,835.00	
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00	
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$20.00	
	6i. Other. Add all other nonpriority unsecured claims. Write	6i.	\$15,036.28	
	that amount here.		\$42,891.28	7
	6i Total Add lines 6f through 6i	6i	Φ42,091.20	1

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Fill in this infor	mation to identify your ca	ase:		
Debtor 1	Krista	Marie	Fahey	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		Northern	District of Illinois (State)	
Case number			(State)	

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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			D	ocument rage 4	12 01 79
Fill	in this infor	nation to identify your c	ase:		
Del	otor 1	Krista	Marie	Fahey	
		First Name	Middle Name	Last Name	
_	otor 2				
(Sp	ouse, if filing)	First Name	Middle Name	Last Name	
Un	ited States B	ankruptcy Court for the:	Northern	District of Illinois	
				(State)	
	se number nown)				
(11.10	OWIII				Check if this is an
					amended filing
\sim	cc: - : - I	C 10011			arronada illing
U	пісіаі	Form 106H			
Sc	hedul	H: Your Cod	lebtors		12/15
filin the	g together, entries in t	both are equally respon	nsible for supplying corre	ect information. If more spa	omplete and accurate as possible. If two married people are lice is needed, copy the Additional Page, fill it out, and number if any Additional Pages, write your name and case number (if
1.	Do you ha	ve any codebtors? (If yo	ou are filing a joint case, do	not list either spouse as a co	debtor.)
	√ No				
	Yes				
,	Within the	last 9 years, have you	lived in a community pre	norty state or torritory? (C	Community property states and territories include Arizona, California,
2.		• •	• •	/ashington, and Wisconsin.)	ommunity property states and territories include Arizona, Callionna,
	✓ No. (Go to line 3.			
	Yes.	Did your spouse, forme	r spouse, or legal equiva	alent live with you at the time	; ?

Zip Code

Yes. In which community state or territory did you live? ______ Fill in the name and current address of that person.

Name of your spouse, former spouse, or legal equivalent

State

Number Street

City

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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				9			
Fill in this inf	ormation to identify	your case:					
Debtor 1	Krista	Marie	Fahey				
	First Name	Middle Name	Last N	ame	— Che	eck if this is:	
Debtor 2 (Spouse, if filing)	First Namo	Middle Name	Last N	amo	— I п	An amended filing	
						A supplement showing po	ost-petition chapter 13
United States the:	Bankruptcy Court for	Northern	District of Illi	nois itate)		expenses as of the follow	
Case number			(0	naicj	<u> </u>		
(If known)						MM / DD / YYYY	
Official	Form 106I						
Schedu	le I: Your In	come					12/15
information a spouse. If mo number (if kr	bout your spouse. I		d your spous	se is not filing	g with you, do	not include information	on about your
1. Fill in you	r employment		Debtor 1			Debtor 2	
informatio	on.	Employment status					
	e more than one job, parate page with	Employment status	✓ Emplo	nyea nployed		Employed Not Employed	
	n about additional		☐ NOT EI	прюуец		Not Employed	
employers	-	Occupation	insurance	verification		_	
Include pa self-emplo	rt time, seasonal, or	Employer's name	ATI Physic	al Therapy			
		Employer's address	790 Remir	ngton Blvd			
	n may include student aker, if it applies.		Number Str	eet		Number Street	
			Bolingbroo	ok Illinois	60440		
			City	State	Zip Code	City	State Zip Code
		How long employed there?	4 years 8 r	nonths			
Part 2: Giv	re Details About N	Monthly Income					
		<u> </u>	- If				landa a san a san Elliana
spouse unles	s you are separated.	the date you file this form	•		•	·	
	non-filing spouse have attach a separate she	e more than one employer, et to this form.	combine the	information for	all employers fo	•	below. If you need
				For	Debtor 1	For Debtor 2 or non-filing spouse	
		ary, and commissions (befo , calculate what the monthly		2.	\$2,935.14		-
3. Estimat	e and list monthly over	rtime pay.		3	+ \$0.00		<u>-</u> _,
4. Calcula	te gross income. Add li	ne 2 + line 3.		4.	\$2,935.14		

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Debtor	1Krista	Marie	Fahey		Case number			
	First Name	Middle Name	Last Name		known) For Debtor 1	For Debtor 2 or non-filing spouse		
Сору	line 4 here		→ 4	٠.	\$2,935.14			
5. List a	all payroll deductions							
5a. 1	Гах, Medicare, and So	ocial Security deductions	5	āa.	\$474.07			
5b. I	Mandatory contributi	ons for retirement plans	5	ōb.	\$0.00			
5c. \	/oluntary contribution	ns for retirement plans	5	ōc.	\$0.00			
5d. l	Required repayments	s of retirement fund loans	5	īd.	\$0.00			
5e. I	nsurance		5	ēe.	\$230.82			
5f. C	Domestic support obli	igations	5	ōf.	\$0.00			
5g. l	Union dues		5	īg.	\$0.00			
5h. (Other deductions. Sp	ecify: Charitable contributions	5	5h. +	\$10.83 +			
		ns. Add lines 5a + 5b + 5c + 5d + 5e +	5f + 5g 6	S.	\$715.72			
7. Calc	ulate total monthly ta	ake-home pay. Subtract line 6 from lin	ie 4. 7	7.	\$2,219.43			
8. List a	all other income regu	ılarly received:						
ŀ	ousiness, profession,							
Ç		each property and business showing and necessary business expenses, and come.	_	Ba.	\$0.00			
8b. I	Interest and dividend	ls	8	Bb.	\$0.00			
	Family support payme dependent regularly r	ents that you, a non-filing spouse, or	ra					
	nclude alimony, spous divorce settlement, and	sal support, child support, maintenance I property settlement.		Bc.	\$0.00			
8d. l	Unemployment comp	ensation	8	3d.	\$0.00			
8e. \$	Social Security		8	Be.	\$0.00			
lı c u h	nclude cash assistance ash assistance that you	sistance that you regularly receive e and the value (if known) of any non- u receive, such as food stamps (benefit I Nutrition Assistance Program) or		Bf.	\$0.00			
8a. I	Pension or retiremen	t income		3g.	\$0.00			
Ū	Other monthly incom			3h. +	\$0.00 +			
	-	lines $8a + 8b + 8c + 8d + 8e + 8f + 8g$	+ 8h. 9). [\$0.00			
	culate monthly incom the entries in line 10 fo	ne. Add line 7 + line 9. or Debtor 1 and Debtor 2 or non-filing s		10.	\$2,219.43 +		=	\$2,219.43
Inclu frien	ude contributions from ds or relatives.	ontributions to the expenses that you an unmarried partner, members of you ts already included in lines 2-10 or and	ır household	, your o	lependents, your roomn			
Spec	cify:						11. +	\$0.00
		ast column of line 10 to the amount Summary of Schedules and Statistical St				•	12.	\$2,219.43 Combined
13. Do	you expect an increa No. Yes. Explain:	se or decrease within the year after	r you file thi	s form	,			monthly income

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		Docu	ment Page 45 01 78	9	
Fill in this infor	mation to identify y	our case:			
Debtor 1	Krista	Marie	Fahey		
	First Name	Middle Name	Last Name	Check if this is:	
Debtor 2 (Spouse, if filing)	E'm Nome	AAPALIII. Niews	LastNess	An amended filir	na
(ороазе, п шпд)	First Name	Middle Name	Last Name	브	nowing post-petition chapter 13
United States E	Sankruptcy Court for	the: Northern E	District of Illinois (State)		the following date:
Case number	-		(Oldio)	-	
(If known)				MM / DD / YYYY	,
Official	Form 106	J			
Schedul	e J: Your E	xpenses			12/15
information. If (if known). Ans					
1. Is this a joi					
✓ No. Go	to line 2				
		n a separate household?			
	_	i a separate nousenoiu:			
L	No				
	Yes. Debtor 2 mu	ust file Official Forms 106J-2, <i>Expen</i>	ses for Separate Household of Debi	for 2.	
2. Do you hav	e dependents?	No			
Do not list D	ebtor 1 and	Yes. Fill out this information for	Dependent's relationship to	Dependent's	Does dependent live
Debiol 2.		each dependent	Debtor 1 or Debtor 2 Child	age	with you? No.
			Offilia		Yes.
			Child		No.
					Yes.
	enses include f people other	√ No			
than yourself and	d vour	Yes			
dependents	-	_			
Part 2: Estil	mate Your Ongo	ing Monthly Expenses			
	_		an one mainer this forms on a count	amant in a Chantau 1	2 to woment
	of a date after the l	ur bankruptcy filing date unless y bankruptcy is filed. If this is a sup			
	•	non-cash government assistance i ded it on <i>Schedule I: Your Incom</i> e	-		Your expenses
	or home ownershi	ip expenses for your residence. In 4.	clude first mortgage payments and		4.
If not incl	uded in line 4:				
4a. Real e	state taxes				4a \$0.00

4b.

4c.

4d.

\$0.00

\$0.00

\$0.00

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Krista Marie Fahey Case number (if known)
First Name Middle Name Last Name

		Your expenses
5. Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00
6. Utilities:		
6a. Electricity, heat, natural gas	6a.	\$250.00
6b. Water, sewer, garbage collection	6b.	\$135.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$375.00
6d. Other. Specify:	6d	\$0.00
7. Food and housekeeping supplies	7.	\$500.00
8. Childcare and children's education costs	8.	\$0.00
9. Clothing, laundry, and dry cleaning	9.	\$175.00
10. Personal care products and services	10.	\$150.00
11. Medical and dental expenses	11.	\$125.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments	12.	\$250.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$100.00
14. Charitable contributions and religious donations	14.	\$0.00
15. Insurance.Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a	\$0.00
15b. Health insurance	15b	\$0.00
15c. Vehicle insurance	15c	\$68.00
15d. Other insurance. Specify:	15d	\$0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
Specify:	16	\$0.00
17. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a	\$100.00
17b. Car payments for Vehicle 2	17b	\$0.00
17c. Other. Specify:	17c	\$0.00
17d. Other. Specify:	17d	\$0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from		\$0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	
19.Other payments you make to support others who do not live with you.		** **
Specify:	19.	\$0.00
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property	20a	\$0.00
20b. Real estate taxes.	20a 20b	\$0.00
20c. Property, homeowner's, or renter's insurance	20b 20c	\$0.00
20d. Maintenance, repair, and upkeep expenses.	200 20d	\$0.00
20e. Homeowner's association or condominium dues		
253. Tollicollinos o accordance de contactinham dacc	20e	\$0.00

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Debtor 1 Krist		Marie	Fahey	Case number (if known)	
First	Name	Middle Name	Last Name		
21. Other. Spe	ecify:			21	\$0.00
	your monthly expense	es.			\$2,228.00
	nes 4 through 21.				\$0.00
	` .	,	from Official Form 106J-2	2	\$2,228.00
22c. Add li	ne 22a and 22b. The re	sult is your monthly exp	enses.	22.	
23. Calculate	your monthly net inco	ome.			
23a. Copy	line 12 (your combined	monthly income) from S	Schedule I.	23a	\$2,219.43
23b. Copy	your monthly expenses	from line 22 above.		23b	\$2,228.00
	, , ,	ses from your monthly in	ncome.		(\$8.58)
The r	esult is your monthly ne	et income.		23c	
	payment to increase or Explain here:	decrease because of a n	oan within the year or do y nodification to the terms o chased car from friend 1.5		

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Fill in this infor	mation to identify your ca	ase:		
Debtor 1	Krista	Marie	Fahey	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Illinois	
Case number			(State)	

Official Form 106Dec

П	Check if this is an
_	amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t 1: Sign Below						
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?							
	✓ No						
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).					
	Under penalty of perjury, I declare that I have read the summary a that they are true and correct.	and schedules filed with this declaration and					
x	/s/ Krista Fahey	×					
^	Signature of Debtor 1	Signature of Debtor 2					
	Date 2/6/2017	Date					
	MM/DD/YYYY	MM/DD/YYYY					

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Debtor 1 Debtor 2 (Spouse, if filing	Krista First Nam							
		Э	Marie Middle	Name	Fahey Last Name	_		
	g) First Nam	<u> </u>	Middle	Name	Last Name	_		
United State	es Bankruptcy (Court for the:	Northern	Dist	rict of Illinois			
Case numbe	er				(State)			
(If known)								Check if this is
Officia	l Form	107						amended filing
Statem	ent of F	inancia	I Affairs 1	for Indivi	duals Filing f	or Bankrı	ıptcy	12/
information number (if l	n. If more spa known). Ans	ace is neede wer every qu	d, attach a sepuestion.	parate sheet to	are filing together, b this form. On the to ou Lived Before			supplying correct your name and case
	is your curre				<u> </u>			
□ V	Married Not married							
2. Durin	ig the last 3 ye	ears, have yo	u lived anywher	e other than wh	ere you live now?			
	No ∕es. List all of t	he places yo	u lived in the las	st 3 years. Do no	nt include where you liv	ve now.		
	Debtor 1:			Dates Debto there	r 1 lived Debtor 2	:		Dates Debtor 2 lived there
					Same	e as Debtor 1		Same as Debtor 1
1	Number Street			From	Number :	Street		From
_			_	To				To
<u>-</u>	City	State	Zip Code		City	State	Zip Code	
	,		<u></u>			e as Debtor 1	p	Same as Debtor 1
1	Number Street		_	From	Number	Street		From
				То				То
_					City	State	Zip Code	
-	City	State	Zip Code					

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Case number (if known)

Fahey

Marie

First Name Middle Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$2652.36 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, \$35693.21 For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, \$31000.00 For the calendar year before that: commissions. commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2016 For the calendar year before that: (January 1 to December 31, 2015

Debtor 1 Krista

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Fahey Debtor 1 Krista Marie Case number (if known) First Name Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment

City

State

Zip Code

Suppliers or vendors
Other

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Debtor 1	Krista		Marie	Fahe	ey	Case number	(if known)
	First Name		Middle Name	Last	Name		
Insid corp ager such	ders include your porations of which nt, including one f n as child support	relatives; ang you are and or a busine	y general partners: officer, director, p ss you operate as	relatives of any gerson in control, or	eneral partners; part or owner of 20% or	nerships of which y more of their voting	who was an insider? ou are a general partner; gecurities; and any managing domestic support obligations,
ightharpoons	No						
Ш	Yes. List all pay	ments to ar	ı ınsıder.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				
insid Inclu	der? ude payments on No	debts guara		d by an insider.	Total amount paid	Amount you still owe	n account of a debt that benefited an Reason for this payment Include creditor's name
	Insider's Name						
	Number Street						
-	City	State	Zip Code				
	Insider's Name						
	Number Street						

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Debtor 1 Krista Fahev Marie Case number (if known) First Name Middle Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Contract Will County Courthouse Pending Cach v. Fahey Court Name On appeal 19 W Jefferson St Case number NumberStreet Concluded 2015 SC 3582 Illinois 60432 Joliet City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property garnishment of wages 12/2016 \$0 CACH LLC Creditor's Name Explain what happened 4340 S MONACO SECOND FLOOR Number Street Property was repossessed. Property was foreclosed. **DENVER** Colorado 80237 Property was garnished. State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed.

City

State

Zip Code

Property was garnished.

Property was attached, seized, or levied.

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Deb	otor 1 Krista First Name	Marie Middle Name	Fahey Last Name	Case number (if known)	
11.	Within 90 days before you accounts or refuse to mak			pank or financial institution, set off any am	ounts from your
	✓ No Yes. Fill in the details.				
	_		Describe the action th	e creditor took Date action was taken	Amount
	Creditor's Name		-		<u> </u>
	Number Street		Last 4 digits of account	number: XXXX-	
	City State	e Zip Code	-		
12.		ed for bankruptcy, was		possession of an assignee for the benefit of	of creditors, a court-
	No	outain, or another official			
Pari	Yes t 5: List Certain Gifts and	d Contributions			
13.	Within 2 years before you	filed for bankruptcy, di	d you give any gifts with a t	otal value of more than \$600 per person?	
	✓ No Yes. Fill in the details f	for each gift.			
	Gifts with a total value per person	e of more than \$600	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You G	ave the Gift	-		-
	Number Street		-		
	City State	e Zip Code	-		
	Person's relationship to	you			
	Person to Whom You G	ave the Gift	-		
	Number Street		_		
	City State Person's relationship to	•	-		

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btor 1	Krista	Marie	Fahey	Case number (if know	vn)	
	First Name	Middle Name	Last Name			
\A/:-	ihin O waana hafana wax	filad fan hamkmuntau di	d wi ow., wifto ou combuil	hutiana with a tatal value	of more than \$600	ta anu aharitus
WI	inin 2 years before you	filed for bankruptcy, di	d you give any gifts or contril	outions with a total value	of more than \$600	to any charity?
✓	No					
	Yes. Fill in the details f	or each gift or contribu	tion.			
	Gifts or contributions	to charities	Describe what you con	tributed	Date you	Value
	that total more than \$	\$600			contributed	
	Charity's Name		_			
	·		_			
	N		_			
	Number Street					
	City Stat	te Zip Code	_			
6:	List Certain Losses					
	Yes. Fill in the details. Describe the property how the loss occurred		Describe any insurance Include the amount that	insurance has paid. List	Date of your loss	Value of property lost
			pending insurance claims A/B: Property.	s on line 33 of Schedule		
	No Yes. Fill in the details.					
~	ros. I il il dio dotale.		Description and value of transferred	of any property	Date payment or transfer was made	Amount of payment
	Semrad Law Firm		Attorney's Fee - 0.00		2/6/2017	\$0.00
	Person Who Was Paid				2,0,2011	40.00
	10 N. Martingale Road		_			
	Number Street					
	Suite 400		_			
	Schaumburg Illin		_			
	City Stat	te Zip Code				
	Email or website addres	SS	_			
	None		_			
	Person Who Made the	Payment, if Not You]	
	Person Who Was Paid		_			
	Number Street		_			
	City	te Zip Code	_			
	City Stat	E ZID CODE				
	Email or website address		_			

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Deb	tor 1	Krista	Marie	Fahey	Case n	umber (if known)			
		First Name	Middle Name	Last Name					
17.	hel	thin 1 year before you filed p you deal with your credit not include any payment or to No	ors or to make payme		r behalf p	ay or transfer	any property to a	nyone v	who promised to
		Yes. Fill in the details.							
				Description and value of any transferred	/ property		Date payment or transfer was made	Amou	unt of payment
		Person Who Was Paid							
		Number Street							
		City State	Zip Code						
18.	the Inc	ordinary course of your bu	usiness or financial aff and transfers made as se	ecurity (such as the granting of a s					
	✓	No Yes. Fill in the details.							
				Description and value of any property transferred	'	Describe any payments recin exchange	property or ceived or debts p	aid	Date transfer was made
		Person Who Received Tran	sfer						
		Number Street							
		City State Person's relationship to you	Zip Code u						
		Person Who Received Tran	sfer						
		Number Street							
		City State Person's relationship to you	Zip Code u						
19.	ber	thin 10 years before you file neficiary? ese are often called asset-pro		you transfer any property to a	self-settle	ed trust or simi	lar device of whi	ch you	are a
	✓	No Yes. Fill in the details.							
				Description and value of th	e propert	y transferred			Date transfer was made
		Name of trust							

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Debtor 1 Krista Fahey Marie Case number (if known) First Name Middle Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was number instrument before closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name

City

Number Street

State

Zip Code

Street

State

Zip Code

Number City

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Fahev Debtor 1 Krista Marie _ Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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Deb	tor 1	Krista		Marie	Fal	hey	Cas	e number <i>(ii</i>	known)		
		First Name		Middle Name	Las	t Name	<u> </u>		<u> </u>		
26.	Hav	e you been a party	y in any judic	ial or administ	rative procee	eding under	any environmer	ntal law? In	clude settler	nents and ord	ers.
	Ħ	Yes. Fill in the det	ails.								
	Ч				Court or age	ency		Nature o	of the case		Status of the case
		Case title									Pending
					Court Name						
		Case number			NumberStree	;t					On appeal Concluded
					City	State	Zip Code				Concluded
Par	t 11:	Give Details Ab	oout Your B	usiness or C	onnections	to Any Bu	siness				
27.	With	nin 4 years before	you filed for	bankruptcy, di	d you own a l	business or	have any of the	following c	onnections t	o any busines	s?
	\rightarrow	A member of A partner in a An officer, dir	a limited liab a partnership rector, or ma at least 5% o	naging executi	LLC) or limite ve of a corpo	ed liability pa	activity, either f rtnership (LLP) poration	ull-time or p	oart-time		
	Ħ	Yes. Check all that				w for each b	usiness.				
			117				ire of the busine	ess			number Do not number or ITIN.
		Business Name			_				EIN:		
		Number Street							Dates busi	ness existed	
		City	State	Zip Code	Name —	of accounta	ant or bookkeep	er	Europe	т.	
		Oily	Otato	Zip Gode					From	10	
					Descri	ibe the natu	ire of the busine	ess			number Do not number or ITIN.
		Business Name			_				EIN:		
		Number Street				of accounts	ant or bookkeep	ner .	Dates busi	ness existed	
		City	State	Zip Code		or adddunte	ant of Bookkeep		From	То	
					Descri	ibe the natu	re of the busine	ess			number Do not number or ITIN.
		Business Name			_				EIN:		
		Number Street			Nome	of account	ant or bookkoo	ner .	Dates busi	ness existed	
		City	State	Zip Code		or accounts	ant or bookkeep	161	From	To	

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Debt	tor 1 Krista	Marie	Fahey	Case number (if known)
	First Name	Middle Name	Last Name	
28.	Within 2 years before yo creditors, or other partic		ou give a financial stateme	nt to anyone about your business? Include all financial institutions,
	✓ No Yes. Fill in the details	s below.		
	_		Date issued	
	Nome		MM/DD/YYYY	
	Name		WIW, OD, TTTT	
	Number Street			
	0''	7. 0 1	<u> </u>	
	City	State Zip Code		
Part	12: Sign Below			
t	true and correct. I unders a bankruptcy case can re	tand that making a false sta sult in fines up to \$250,000,	atement, concealing prope	ents, and I declare under penalty of perjury that the answers are rty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	/\$/ Kri	sta Fahey of Debtor 1		Signature of Debtor 2
	Signature	TOT DEDICT 1		Date
	Date 2/6	6/2017		Date
	Did you attach additional	pages to Your Statement of	f Financial Affairs for Indivi	duals Filing for Bankruptcy (Official Form 107)?
l [√ No			
į	Yes			
	Did you pay or agree to pa	ay someone who is not an a	ttorney to help you fill out I	pankruptcy forms?
[✓ No			
	Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice,

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Fill in this information to identify your case:						
Debtor 1	Krista	Marie	Fahey			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		Northern	District of Illinois (State)			
Case number (If known)						

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral Did you claim the property What do you intend to do with the property that secures a debt? as exempt on Schedule C? Surrender the property. Creditor's name: Retain the property and redeem it. Yes Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: Surrender the property. Creditor's No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]: No. Surrender the property. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

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Debto	r Krista	Marie	Fahey	Case number (if
1	First Name	Middle Name	Last Name	known)
Part 2:	List Your Unexpired Person	onal Property Leas	es	
inform		ate leases. Unexpired	d leases are leases that	y Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).
De	escribe your unexpired personal	property leases		Will the lease be assumed?
Le	ssor's name:			□ No □ Yes
	scription of leased operty:			
Le	ssor's name:			□ No □ Yes
	scription of leased operty:			
Le	ssor's name:			□ No □ Yes
	scription of leased operty:			
Le	ssor's name:			□ No □ Yes
	scription of leased operty:			
Le	ssor's name:			□ No □ Yes
	scription of leased operty:			
Le	ssor's name:			□ No □ Yes
	scription of leased operty:			_
Le	ssor's name:			□ No □ Yes
	scription of leased operty:			
Part 3:	Sign Below			
	er penalty of perjury, I declare perty that is subject to an unex		my intention about any	property of my estate that secures a debt and any personal
_	/s/ Krista Fahey		× _	
5	Signature of Debtor 1		Siç	gnature of Debtor 2
[Date 2/6/2017 MM/DD/YYYY		Da	ate MM/DD/YYYY

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B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re	Krista Marie Fahey			Case No.	
_	Debtor				(If known)
				Chapter	Chapter 7
	DISCLOSURE OF CO	OMPENSA	ATION OF AT	TORNEY F	OR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. compensation paid to me within one year rendered or to be rendered on behalf of t	r before the filin	g of the petition in bankr	uptcy, or agreed to	be paid to me, for services
	For legal services, I have agreed to accept	t			\$1,425.00
	Prior to the filing of this statement I have	ereceived			\$0.00
	Balance Due				\$1,425.00
2.	The source of the compensation paid to	me was:			
	✓ Debtor	Other	(specify)		
3.	The source of the compensation paid to	me is:			
	✓ Debtor	Other	(specify)		
4.	I have not agreed to share the above members and associates of my law f	⊢disclosed comp irm.	pensation with any other	person unless the	y are
	I have agreed to share the above-dismembers or associates of my law fir the people sharing in the compensation	m. A copy of the	agreement, together wit		
5.	In return for the above-disclosed fee, I have a. Analysis of the debtor's financial bankruptcy;				
	b. Preparation and filing of any peti	tion, schedules,	statements of affairs and	d plan which may b	pe required;
	c. Representation of the debtor at the	he meeting of cr	editors and confirmation	hearing, and any a	adjourned hearings thereof;
6.	By agreement with the debtor(s), the abo	ve-disclosed fee	e does not include the fol	lowing services:	
		CE	ERTIFICATION		
	certify that the foregoing is a complete stor(s) in this bankruptcy proceedings.	atement of any a	agreement or arrangemer	nt for payment to m	ne for representation of the
	2/6/2017		/s/ Yisro	el Y Moskovits	
	Date		Signatu	re of Attorney	
			Semra	ad Law Firm	
			Name	of law firm	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Fahey, Krista Marie	Case No	Case No		
	Debtor(s)	Chapter.	Chapter7		
	VERIFIC	ATION OF CREDITOR MAT	TRIX		
Tł knowledge	he above named Debtors hereby verify e.	that the attached list of creditors is tr	rue and correct to the best of their		
Date:	2/6/2017	/s/ Fahey, Krista Fahey, Krista Ma Signature of Del	arie		

Federal Loan Servicing Po Box 530210 Atlanta, GA, 30353

VISION FIN 1900 W SEVERS RD LA PORTE, IN, 46350

COLLECTION BUREAU OF A 25954 EDEN LANDING RD HAYWARD, CA, 94545

CAPITAL ONE P O Box 30253 Salt Lake City, UT, 84130

PORTFOLIO RECOVERY ASS 120 CORPORATE BLVD STE 1 NORFOLK, VA, 23502

I C SYSTEM INC PO BOX 64378 SAINT PAUL, MN, 55164

US DEP ED PO BOX 5609 GREENVILLE, TX, 75403

SYNCB/CARECR PO Box 960061 Orlando, FL, 32896

CHASE CARD PO BOX 15298 WILMINGTON, DE, 19850

TRUST REC SV 541 OTIS BOWEN DRI MUNSTER, IN, 46321

RECMGMT SRVC 240 EMERY STREET BETHLEHEM, PA, 18015 ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE, FL, 32256

ALLY FINANCIAL 200 RENAISSANCE CTR DETROIT, MI, 48243

G M A C 15303 S 94TH AVE ORLAND PARK, IL, 60462

CACH LLC 1001 E Chicago Ave Suite 121 Naperville, IL, 60540

PLS F/K/A The Payday Loan of Illinois Inc. 800 Jorie Blvd 2nd Floor Oak Brook, IL, 60523

Nicor Advanced Energy PO Box 0632 Aurora, IL, 60507

ComEd 3 Lincokln Cetre c/o Sabrina Copelan Villa Park, IL, 60181

Midwest Diagnostic Pathology 75 Remittance Dr Ste 3070 Chicago, IL, 60675

Transworld Systems Po Box 17221 Wilmington, DE, 19850

radiology Imaging Consultants, SC 75 Remittance Dr - dept 1324 Chicago, IL, 60675

Harris and Harris LTD 111 West Jackson Blvd Suite 400 Chicago, IL, 60604

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Advocate Medical Group 9730 S Western Ave # 500 Evergreen Park, IL, 60805

Advocate Health Care 4001 Vollmer Rd Olympia Flds, IL, 60461

Vision Financial Services PO Box 1768 La Porte, IN, 46352

Quest Diagnostics PO Box 740777 Cincinnati, OH, 45274

Credit Collection Services 725 Canton Street Norwood, MA, 02062

Palos Community Hospital 12251 S. 80th Ave Palos Heights, IL, 60463

Nationwide Credit & Collection PO Box 3219 C/O Evergreen Bank Group Hinsdale, IL, 60522

Nationwide Recovery Service PO Box 8005 Cleveland, TN, 37320

Quinlan and Fabish Music Company 3140 S Federal St Chicago, IL, 60616

Creditors Collection Bureau, Inc. PO Box 63 Kankakee, IL, 60901

Lockport Express Medical 16221 W. 159th St Lockport, IL, 60441

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American Medical Collection Agency 4 Westchester Plaza # Suite 110 Elmsford, NY, 10523

Vasdekas MD, Thomas J. 10660 West 143rd St Suite B. Orland Park, IL, 60462

ICS Collection Service PO Box 1010 Tinley Park, IL, 60477

high Tech Medical Park 0236 Momentum Place Chicago, IL, 60689

MinuteClinic Diagnostic of Illinois PO BOX 8446 Belfast, ME, 04915

CMRE FINANCIAL SVCS IN 3075 E Imperial Hwy Ste 200 Brea, CA, 92821

Client Services Inc 3451 Harry S. Truman Blvd. Saint Charles, MO, 63301

Integrity orthopedics Po Box 609 Matteson, IL, 60443

Universal Fidelity, LP PO Box 219785 Houston, TX, 77218 Case 17-03376 Doc 1 Filed 02/06/17 Entered 02/06/17 11:52:34 Desc Main Document Page 73 of 79

Debtor 1 Krista	Marie	Fahey Last Name	Case number (if kno	nown)	
First Name	Middle Name estions for Reporting Purp				
Part 6: Answer These Que 16. What kind of debts do you have?	16a. Are your debts prim "incurred by an indiv No. Go to line 16 Yes. Go to line 1	arily consumer de idual primarily for a fb. 7. arily business det s or investment or ide. 7. 7.	a personal, family, or hous ots? Business debts are de through the operation of t	lebts that you incurred to obtain the business or investment.	
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	No. I am not filing under Yes. I am filing under Ch expenses are paid No. Yes.	anter 7. Do vou estir			
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	5,00	00-5,000 01-10,000 001-25,000	25,001-50,000 50,001-100,000 More than 100,000	
19. How much do you estimate your assets to be worth?		\$10 \$50	000,001-\$10 million 0,000,001-\$50 million 0,000,001-\$100 million 00,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10 \$50	000,001-\$10 million 0,000,001-\$50 million 0,000,001-\$100 million 0,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
Part 7: Sign Below					
For you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Signature of Debtor 2 Executed on			or 13 ed fill	

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Fill in this infor				
	mation to identify your ca	ase:		
Debtor 1	Krista	Marie	Fahey	_
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	-
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)	_
Case number (if known)		······································		_
<u> </u>	Form 106De	C		Check if this is ar amended filing
 Declarat	ion About an l	individual Deb	tor's Schedules	12/15
money or prop	erty by fraud in connecti 1341, 1519, and 3571.	on with a bankruptcy ca	se can result in fines up to \$	king a false statement, concealing property, or obtaining 250,000, or imprisonment for up to 20 years, or both. 18
Did you p	ay or agree to pay some	one who is NOT an attor	ney to help you fill out bankı	uptcy forms?
✓ No	ay or agree to pay some	one who is NOT an attor	ney to help you fill out bankı Attach Bankruptcy Pe Signature (Official Fo	ntition Preparer's Notice, Declaration, and

MM/DD/YYYY



Date 2/6/2017

MM/DD/YYYY

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Debtor 1		Marie	Fahey	Case number (if known)
	First Name	Middle Name	Last Name	COMMISSION OF THE PROPERTY OF
	thin 2 years before yo editors, or other parti		you give a financial stater	nent to anyone about your business? Include all financial institutions,
☑	No Yes. Fill in the detail	Is below.		
-			Date issued	
	Name		MM/DD/YYYY	_
	Number Street			
	City	State Zip Code	_	
art 12:	Sign Below			
a ba	v _	isult in fines up to \$250,000	, or imprisonment for up t	o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	Signature	e of Debtor 1	<u> </u>	Signature of Debtor 2
	Date 2/6	6/2017	U	Date
Did y	ou attach additional	pages to Your Statement o	f Financial Affairs for Îndi	viduals Filing for Bankruptcy (Official Form 107)?
<u> </u>	No Yes			
Did y	ou pay or agree to pa		ttorney to help you fill out	
		ay someone who is not an a	ttorney to neip you iii ou	bankruptcy forms?
	No	ay someone wno is not an a	ttorney to noip you iiii oo	t bankruptcy forms? Attach the Bankruptcy Petition Preparer's Notice,

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otor Krista	Marie	Fahey	Case number (if
First Name	Middle Name	Last Name	known)
2: List Your Unexpire	ed Personal Property Leas	ses	
any unexpired personal p	t. lease that you listed i	n Schedule G: Executory d leases are leases that	Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).
Describe your unexpired	personal property leases		Will the lease be assumed?
Lessor's name:			□ No □ Yes
Description of leased property:			
Lessor's name:			No Yes
Description of leased property:			
Lessor's name:			No Yes
Description of leased property:			
Lessor's name:			□ No □ Yes
Description of leased property:			
Lessor's name:			No Yes
Description of leased property:			
Lessor's name:			No Yes
Description of leased property:			
Lessor's name:			No Yes
Description of leased property:			
3: Sign Below			
	declare that I have indicated an unexpired lease.	my intention about any	property of my estate that secures a debt and any personal
s/ Krista Fahey	nines Jan	ey × Sig.	nature of Debtor 2
Date 2/6/2017	(Dat	

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Fahey, Krista Marie	Case No	Case No		
Debtor(s)					
		., Chapter.	Chapter7		
	VERIFIC	ATION OF CREDITOR MAT	RIX		
Th knowledge		that the attached list of creditors is tr	ue and correct to the best of their		
Date:	2/6/2017	s/Pahey/Krista Fahey, Krista Ma Signature of Deb	urie June June June June June June June Jun		

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also un derstand that The Semrad Law Firm, LLC may incur costs for such it ems as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$ 1425.00 attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and at tendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$30.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 1. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filling of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filling of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filling of my case. I have been advised that I have a right to consult other counsel before I sign

Debtor Initials KF

the second retainer. Further, if I do not wish for The Semrad La w Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee of to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: February 6, 2017

Attorney Yistoel Y. Moskovits